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ABSTRACT

This learning activity package on confidentiality is one of a series of 12 titles developed for use in health occupations. education programs. Materials in the package include objectives, a list of materials needed, a list of definitions, information sheets, and answers to reviews. These topics are covered: Confidentiality, when not to discuss information about patients, and what is confidential information. (YLB)

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LAP Learning ...

"CONFIDENTIALITY"



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CALIFORNIA STATE DEPARTMENT OF EDUCATION
Wilson Riles, Superintendent of Public Instruction
Sacramento, 1982

"CONFIDENTIALITY"

PREPARED BY: LILLIAN RUNGE, RN INSTRUCTOR, COASTLINE ROP

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After you complete this LAP, you will:

- 1. DEFINE CONFIDENTIALITY.
- 2. Name seven situations in which you should <u>not</u> discuss information about patients.
- List three examples of what is considered confidential
 Information about patients.

MATERIALS NEEDED:

PENCIL OR PEN NOTEBOOK PAPER *WORK SHEET

^{*}Before you begin the LAP, pick up, work sheet from the instructor.



CONFIDENTIAL (ADJECTIVE):

- 1. Spoken or written in confidence; secrets
- 2. BETOKENING CONFIDENCE OR INTIMACY; IMPARTING PRIVATE MATTERS
- 3. ENJOYING ANOTHER'S CONFIDENCE; ENTRUSTED WITH SECRETS OR PRIVATE INFORMATION

IN ORDER TO UNDERSTAND FULLY THE ABOVE DEFINITION, YOU MUST UNDERSTAND "CONFIDENCE."

CONFIDENCE (NOUN):

- -1. FULL TRUST; BELIEF IN THE TRUSTWORTHINESS OR RELIABILITY OF A PERSON OR THING
- 2. IN CONFIDENCE, AS A SECRET OR PRIVATE MATTER, NOT TO BE DIVULGED OR COMMUNICATED TO OTHERS

Synonym = Trust

Now that you understand the Definitions of confidence and confidential, you should be able to identify, with relative ease, confidential information.



SELECT THREE OR FOUR STUDENTS TO ROLE PLAY SOME SITUATIONS WITH YOU. ASK "THE PATIENT" TO REVEAL, SOME INFORMATION TO YOU THAT IS CONFIDENTIAL. IDENTIFY WHAT FACTS YOU SHOULD REPORT TO YOUR IMMEDIATE SUPERIOR, WHAT FACTS YOU MAY REPEAT TO YOUR PEER, AND WHAT FACTS YOU WOULD NOT REPEAT. HAVE THE REMAINING TWO STUDENTS EVALUATE YOUR CHOICES.

ALL PATIENTS HAVE THE RIGHT TO HAVE ALL INFORMATION ABOUT THEM KEPT IN CONFIDENCE--MEANING THAT ONLY THE PERSONNEL CARING FOR THE PATIENT SHOULD RELATE OR DISCUSS <u>ANYTHING</u> ABOUT THE PATIENT--AND ONLY AS IT RELATES TO THE PATIENT'S CARE.

To HELP YOU UNDERSTAND THIS BETTER, ASK YOURSELF:



- 1. If I WERE THE PATIENT, WOULD I LIKE IT IF STUDENTS AND STAFF TALKED ABOUT MY PERSONAL LIFE WHERE OTHERS MIGHT HEAR IT?
- 2. How would I feel when I returned to school after having been a patient, if I overheard some of my friends talking about what happened to ME, before I chose to discuss it?
- 3: Would IT PLEASE ME TO HEAR THE NEIGHBORS TALKING ABOUT A MEMBER OF MY FAMILY WHO HAD BEEN A PATIENT?



THINK OF MORE EXAMPLES, AND LIST AT LEAST TWO ON YOUR WORK SHEET.

ACTIVITY # 2.

THERE ARE SEVEN. MAJOR SITUATIONS IN WHICH YOU SHOULD NOT DISCUSS INFORMATION ABOUT PATIENTS:

- 1. You should not discuss information about one patient with another patient.
- 2. You should not discuss the patient with concerned friends or visitors.
- 3. You should not discuss the patient with his/HER RELATIVES.
- 4. YOU SHOULD NOT DISCUSS THE PATIENT WITH-ANY MEMBER OF THE NEWS MEDIA.
- 5. YOU SHOULD NOT DISCUSS THE PATIENT WITH FELLOW WORKERS, UNLESS THEY ARE DIRECTLY INVOLVED WITH CARING FOR THAT PATIENT.
- 6. YOU SHOULD NOT DISCUSS THE PATIENT WITH ANY MEMBER OF YOUR FAMILY.
- 7. YOU SHOULD NOT DISCUSS THE PATIENT WITH ANY PERSON IN THE COMMUNITY.

NAME OR LIST OTHER SITUATIONS
YOU CAN THINK OF WHICH VIOLATE
A PATIENT'S CONFIDENTIALITY.



ACTIVITY # 3.

WHAT IS CONFIDENTIAL INFORMATION?

IT IS ANY PERSONAL INFORMATION ABOUT ANY PATIENT THAT:

- 1. HE OR SHE MAY HAVE TOLD YOU
- 2. Information you may have read on the PATIENT'S CHART, SUCH AS:
 - A. DIAGNOSIS
 - B. MEDICAL AND/OR SURGICAL TREATMENT
 - C. PATIENT'S PAST HISTORY
 - D. FINDINGS DURING PATIENT'S PHYSICAL * EXAMINATION *
 - E. PROGRESS NOTES
- 3. Information you may have seen or heard about the patient. •

LET US PAUSE HERE FOR A MOMENT AND ASK..."WHO IS A PATIENT?" A
PATIENT CAN BE YOU, A MEMBER OF YOUR FAMILY, A FRIEND, A PEER, A
"NEIGHBOR, OR A STRANGER...ANY PERSON WHO NEEDS MEDICAL AND/OR
SURGICAL TREATMENT. DOES THIS MAKE THIS PERSON "SPECIAL OR
DIFFERENT?" IF YOU ANSWERED "YES," YOU ARE CORRECT. LET US EXPLORE
"WHY."

A "PERSON" WHO_HAS BECOME A "PATIENT" SUDDENLY HAS MANY OTHER CONCERNS WITH WHICH TO DEAL.



WHO WILL TAKE CARE OF MY CHILDREN?

WILL I LOSE MY JOB?

WILL I EVER BE THE SAME?

WHO WILL TAKE MY PLACE WHILE I AM GONE?

WILL I BE ABLE TO KEEP UP WITH MY SCHOOL WORK?

WILL I BE ABLE TO STAY ON THE SPORTS TEAM?

How LONG WILL THIS LAST?

ADD AS MANY MORE TO THIS LIST AS POSSIBLE.

BECAUSE OF THESE MANY VARIED CONCERNS A PATIENT MAY CONFIDE IN YOU WHILE UNDER STRESS. UNDER MORE NORMAL CIRCUMSTANCES, HE/SHE PERHAPS WOULD NOT HAVE TOLD YOU THE SAME THINGS. YOU MUST RECOGNIZE THAT THE PATIENT "TRUSTS" YOU. YOUR ATTITUDE MUST ASSURE THE PATIENT THAT YOU WILL NOT REPEAT ANYTHING ABOUT HIM/HER OF A PERSONAL NATURE—WHICH IN ESSENCE IS "GOSSIP."



IF THE PATIENT HAS RELATED SOMETHING OF GREAT CONCERN TO YOU, THIS INFORMATION SHOULD BE REPORTED TO YOUR IMMEDIATE SUPERVISOR. THIS IS DONE ONLY IN THE PATIENT'S BEST INTEREST AND WHEN IT CAN BE HELPFUL IN THE TREATMENT OF THE PATIENT.

MAKE A LIST-OF REPORTABLE AND NONREPORTABLE SITUATIONS ON THE WORK SHEET PROVIDED.

Is confidentiality Important only when one is a parient?

Your answer should be "NO," as our "TRUST" is being tested daily:



"NAME DROPPING" IS A COMMON WAY OF BETRAYING A PATIENT'S CONFIDENTIALITY. IF IT IS NECESSARY TO MAKE REFERENCE TO A PATIENT'S DIAGNOSIS, SPECIAL KINDS OF TREATMENT, OR PROGNOSIS, IT SHOULD NEVER BE DONE WHERE YOU MAY BE OVERHEARD, SUCH AS IN THE ELEVATOR, CORRIDOR, CAFETERIA, LOCKER ROOM, BUS, ON CAMPUS, OR AT HOME.

ARE THE SAME TYPES OF THINGS IMPORTANT TO ALL PATIENTS (OR PEOPLE)?

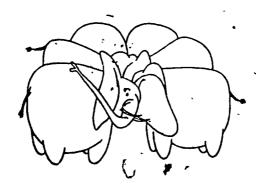
IF YOUR ANSWER WAS "NO," YOU ARE CORRECT. IT IS MOST IMPORTANT THAT YOU LEARN TO DIFFERENTIATE AND RESPECT THE AREAS OF CONFIDENTIALITY OF EACH INDIVIDUAL, BEING CONSTANTLY AWARE THAT YOU CANNOT ASSUME WHAT MAY BE LESS IMPORTANT TO ONE THAN TO ANOTHER.

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IN ORDER TO ENSURE THAT THE PATIENT RECEIVES THE BEST POSSIBLE TREATMENT, IT IS THE ATTENDING PHYSICIAN'S RESPONSIBILITY AND PRIVILEGE TO RELATE ANY INFORMATION TO WHOEVER HE/SHE FEELS CAN USE THE INFORMATION TO BENEFIT THE PATIENT.



REMEMBER ANY PERSON HAS THE RIGHT TO CONFIDENTIALITY. PRIVACY MUST BE PRESERVED, UNLESS IT DIRECTLY RELATES TO THE PATIENT'S CARE.



TURN IN THIS BOOKLET TO YOUR TEACHER
WITH YOUR COMPLETED WORK SHEETS,
AND PICK UP THE FINAL LAP REVIEW.

EAVE A © HAPPY DAY!

Learning Activity Packages Available from the Department of Education

This learning activity package is one of a series of 12 titles relating to health careers that are available from the California State Department of Education. A student packet and an instructor's packet are published in each of the following subjects:

Blood Pressure
Confidentiality
Grooming
Handwashing Technique
Metric System
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Observation of Patient
Oral Hygiene
Shock and Anaphylactic Shock
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Syncope
Temperature, Pulse, and Respiration

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P.O. Box 271
Sacramento, CA 95802

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